

Individual – Create an Account

South Carolina Department of Insurance
300 Arbor Lake Drive, Ste. 1200, Columbia 29223 email: CnsmMail@doi.state.sc.us Tel: 803-737-6160

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Login [La Traducción Española](#)

*User Id: ?

*Password: ?

* Required Fields

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GroupWise WebAccess

Internet

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New User Identification [La Traducción Española](#)

Do you hold an active license?

Only those individuals who currently hold an active individual license with the State of South Carolina Department of Insurance may create a new user account. To create an account, first identify yourself by providing your Social Security Number and Date of Birth below.

*Social Security Number: (include hyphens: ###-##-####) ?

*Date of Birth: (m/d/yyyy) ?


* Required Fields

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PICO SEARCH Go!

South Carolina Health Grant

Account Setup - Secret Questions [La Traducción Española](#)

The South Carolina Department of Insurance uses secret questions to identify you in the event that you forget your password. Three questions are used, each of which must be unique. Please carefully select questions whose answers you will be able to remember, and whose answers would only be known by you.

*Question 1: ?

*Answer 1: ?

*Confirm Answer 1: ?

*Question 2: ?

*Answer 2: ?


*Confirm Answer 2: ?

*Question 3: ?

*Answer 3: ?


*Confirm Answer 3: ?

* Required Fields



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Account Setup [La Traducción Española](#)

Please specify the User Id and Password you wish to use for your user account with the South Carolina Department of Insurance below. User Ids must be unique and passwords must be between 6 and 10 characters long.

*User Id: ?

*Password: ?

*Confirm New Password: ?


* Required Fields

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Login Successful

[La Traducción Española](#)

Welcome Jim Jones

You have successfully logged into the South Carolina Department of Insurance web application! Menu items available only to registered users are now accessible in your menu bar.

Please remember that your password is **CONFIDENTIAL** and should not be shared with anyone to prevent misuse. The Department holds all registered users responsible for their own user accounts and any data modifications made via those accounts.

What would you like to do now?


- Update Individual Demographics
- Apply for License(s)
- Change Password
- Update Secret Questions

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Individual – Demographic Update



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Update Individual Demographics

This form may be used to update your personal information kept on file at the South Carolina Department of Insurance. **All individuals licensed by the Department of Insurance are required to report any changes to resident or business mailing addresses within 30 days of the change. Individuals who do not comply may be subject to administrative penalties of up to \$2500.**

Individual Information

Individual Number: 385801 ?

Mr/Mrs/Ms/Miss:

*Last Name:

*First Name:

Middle Name:

Jr/Sr/etc:

Gender: ☒ Male ☐ Female ☐ Unspecified

Home Address ?

*Street Address: (P.O. Box not accepted.)

*City:

*State:

County:

*Zip Code:

*Country:

South Carolina Health Grant

Free Web and Text Translation
FreeTranslation

Mailing Address ?

*Address: 123 Test Drive

*City: Columbia

County:

*Country: USA

*State: South Carolina

*Zip Code: 29100

Business Address ?

Employer:

*Address: 123 Test Drive

*City: Columbia

County:

*Country: USA

*State: South Carolina

*Zip Code: 29100

Contact Info ?

*Home Phone: 123-123-1234 (###-###-####)

Personal Email:

Business Phone: (###-###-####) Ext:

Fax Number: (###-###-####)

Business Email:

Business Web Site:

*Required Fields

Clear

Save

The Drop Down Menu when the individual is logged on

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the South Carolina Department of Insurance web application! Menu items available only in your menu bar.

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